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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Silicon Valley Bank PAC 3005 Tasman Dr ADDRESS (number and street) (Check if address is changed) Santa Clara 95054 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@millerpoliticallaw.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00333658 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Olson, Rebecca, , , Type or Print Name of Treasurer Olson, Rebecca, , , [Electronically Filed] 80 16 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. **FEC FORM 1**

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